

Arizona Department of Water Resources Water Management Support Section P.O. Box 458 • Phoenix, Arizona 85001-0458 (602) 771-8500 • (800) 352-8488

Notice of Intent to Drill and Abandon an Exploration / Specialty Well \$150 FEE

Review instructions prior to completing form in black or blue ink.

You <u>must</u> include with your Notice:

www.azwater.gov

- \$150 check or money order for the filing fee. Only one Notice
 of Intent to Drill is required for all wells that are drilled by or for the
 same person to obtain geophysical, mineralogical or geotechnical
 data within a single section of land.
- Well construction diagram showing all proposed well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6.

Authority for fee: A.R.S. § 45-596.

**	PLFASE	PRINT	CLEARLY	**

AMA / INA		В	SB
RECEIVED	DATE	WS	
ISSUED	DATE	WQARF	CERCLA

FILE NUMBER
WELL REGISTRATION NUMBER 55 -

SECTION 1. REGISTRY INFORMATION												
Well Type	Location of											
CHECK ONE Mineral Exploration	WELL LOCATION ADDRESS (IF ANY)											
Geotechnical Heat Pump Cathodic Protection	TOWNSHIP (N/S)	RANGE (E/W)	10 ACRE	Number of Wells (holes) per 10-acre location								
Grounding				1/4	1/4	1/4						
Other (please specify):	Use additional bo	xes to the right to l	ist 160,40,10	1/4	1/4	1/4						
		for multiple wells		1/4	1/4	1/4						
		otechnical data on n a single section of		1/4	1/4	1/4						
COUNTY WHERE WELL(S) ARE LOCATED		ns are not required		1/4	1/4	1/4						
	mineralogical exp	oloration wells).		1/4	1/4	1/4						

SECTION 2. OWNER INFORM	SECTION 2. OWNER INFORMATION											
Well Owner		Landowner (if different from Well Owner)										
FULL NAME OF COMPANY, ORGANIZATIO	N, OR INDIVIDUAL	FULL NAME OF COMPANY, GOVERNMENT AGENCY, OR INDIVIDUAL										
MAILING ADDRESS		MAILING ADDRESS										
CITY / STATE / ZIP CODE		CITY / STATE / ZIP CODE										
CONTACT PERSON NAME AND TITLE		CONTACT PERSON NAME AND TITLE										
TELEPHONE NUMBER F	FAX	TELEPHONE NUMBER	FAX									

SECTION 3. DRILLING	AUTHORIZATION								
Drilling Firm		Consultant (if applicable)							
NAME		CONSULTING FIRM							
DWR LICENSE NUMBER	ROC LICENSE CATEGORY	CONTACT PERSON NAME							
TELEPHONE NUMBER	FAX	TELEPHONE NUMBER	FAX						
		E-MAIL ADDRESS							

SECTION 4.			
Questions	Yes	No	If Yes:
Is the proposed well site within 100 feet of a septic tank system, sewer disposal area, landfill, hazardous materials or petroleum storage area or tank?			You must submit a letter requesting a variance from the 100-foot setback requirement (A.A.C. R12-15-818). However, if the proposed well is a geotechnical well that will be abandoned before the drill rig leaves the well site, a variance may be requested by simply checking the box below. I request a variance from the 100-foot setback requirement for a geotechnical well.
If applicable, are you requesting a variance to use thermoplastic casing in lieu of steel in the surface seal?			The wells must be constructed in a vault as defined in A.A.C. R12-15-801(27).
Is there another well name or identification number associated with this well? (e.g., Silver Well #1, CP-2, etc.)			PLEASE STATE

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WELL REGISTRATION NUMBER

55 -

Provide a well construction diagram showing all existing well construction features listed in Section 5 and the proposed abandonment specifications listed in Section 6. Please submit additional sheets (page 2) and additional well construction diagrams if multiple wells are to be drilled and construction or abandonment details vary.

SECTION 5. PROPOSED WELL CONSTRUCTION PLAN (attach additional page if needed)

DATE CONSTRUCTION TO BEGIN

**	Regi	uired	Infor	mation	**
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	Borehol	e l	Casing (if applicable)													
	I FROM FACE			I FROM FACE			MATERIAL TYPE (T				PE		RATIO	'T NC	YPE (T)	
FROM (feet)	TO (feet)	BOREHOLE DIAMETER (inches)	FROM (feet)	TO (feet)	OUTER DIAMETER (inches)	STEEL	PVC	ABS	IF OTHER TYPE, DESCRIBE	BLANK OR NONE	WIRE WRAP	SHUTTER SCREEN	MILLS KNIFE	SLOTTED	IF OTHER TYPE, DESCRIBE	SLOT SIZE IF ANY (inches)

	Annular Material											
DEPTH	I FROM			FILTER PACK								
SURF	FACE				ш	BE	NTON	ITE				
FROM (feet)	TO (feet)	NONE	CONCRETE	NEAT CEMENT OR CEMENT GROUT	CEMENT-BENTONITI GROUT	GROUT	CHIPS	PELLETS	IF OTHER TYPE OF ANNULAR MATERIAL, DESCRIBE	SAND	GRAVEL	SIZE

SECTION 6. PROPOSED WELL ABANDONMENT DESIGN (Refer to ADWR'S Well Abandonment Handbook for additional informa																					
SECTIO	N 6. PRC	<u>PO</u>	SEC) W	ELL.	<u>ABANDONMEN</u>	IT DESIGN	(Refer to Al	DWR	'S W	/ell A	band	onme	ent H	andb	ook	for a	dditional info	ormation.)		
DEPTH	I FROM	Ca	sin	q Tr	eatn	nent (if applicable)	DEPTH	DEPTH FROM		Sealing or Fill Material											
SUR	FACE				TYPE		SURFACE			GROUT TYPE (T)											
FROM (feet)	TO (feet)	SONAR JET	BRUSH OR SCRAPE	MILLS KNIFE	CASING REMOVAL (explain in Remarks)	IF OTHER TYPE, DESCRIBE OR IF CASING IS TO BE PERFORATED, DESCRIBE SPACING AND SIZE OF PERFORATIONS TO BE ADDED	(feet)	TO (feet)	NEAT CEMENT	CONCRETE	SAND-CEMENT GROUT		SAND-BENTONITE : GROUT	HIGH	CHIPS	PELLETS HIGH	SAND	MIXING RATIO by (check one) Weight Volume	ESTIMATE D VOLUME OF MATERIAL (cubic feet)		
Propose	ed Aband	onn	nent	: Me	thoc	(See Well Abandon	nment Handbo	ook)	Emplacement Method of Sealing or Fill Material												
☐ Alternative 1 ☐ Variance Option * ☐ Alternative 2 ☐ Alternative 5: ☐ Alternative 3 ☐ Variance Option 1* * re							equires a letter	her (please specify): GHECK ONE Gravity Pressure Grouting Tremie Pumped													

I state that this notice is filed in compliance with A.R.S. § 45-596 and is complete and correct to the best of my knowledge and belief.								
TYPE OR PRINT NAME AND TITLE								
SIGNATURE OF WELL OWNER OR EXPLORATION FIRM	DATE							
SIGNATURE OF LANDOWNER, IF APPLICABLE (SEE INSTRUCTIONS)	DATE							